BASIC MEET COMP TRACKING REPORT

Territory #: _____

Current Budget: _____

Name: _____

Acct. Name	RH Ctrl # or Mgmt Acct.#	Date Contacted	CTNS SOLD	$'s Committed	$'s Paid	Date Paid	* Copy of Invoice Attached (Y or N)	Cumulative Budget Expensed YTD

If paying via Field Sales Invoicing please attach a copy of the promotional invoice screen after approval.
If paying via the Management Invoicing System, please attach a copy of the PF18 screen after the invoice has been finalized.

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ATTACHMENT C

Source: https://www.industrydocuments.ucsf.edu/docs/jrwn0004